

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Pacific Life Insurance Company Political Action Committee

ADDRESS (number and street) ▼

700 Newport Center Drive

☐ Check if different than previously reported. (ACC)

Newport Beach

CA

92660

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00068528

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☒ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2015

through

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Patricia Douglass

Signature of Treasurer

Patricia Douglass

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		98254.41
(b) Cash on Hand at Beginning of Reporting Period.....	157100.11	
(c) Total Receipts (from Line 19)	31160.97	359006.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	188261.08	457261.08
7. Total Disbursements (from Line 31)	33000.00	302000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	155261.08	155261.08
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 11 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y
 11 / 30 / 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

30627.64

298799.40

(ii) Unitemized

533.33

58207.27

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

31160.97

357006.67

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

31160.97

357006.67

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

2000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

31160.97

359006.67

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

31160.97

359006.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33000.00	302000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33000.00	302000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33000.00	302000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31160.97	357006.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31160.97	357006.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JUNE G ARCE

Mailing Address 20050 EMERALD MEADOW DR

City State Zip Code
 WALNUT CA 91789-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR MKTG COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103621011162

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. JULIE E TRASK

Mailing Address 181 S CRAIG DR

City State Zip Code
 ORANGE CA 92869-3731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR CUSTOMER SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103621211162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DEWEY P BUSHAW

Mailing Address 5433 RESIDENCIA

City State Zip Code
 NEWPORT BEACH CA 92660-9047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

EXEC VP RSD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103623011162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

516.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL J BUSSARD

Mailing Address 5256 LYSANDER LN

City
BRENTWOOD

State Zip Code
TN 37027-3110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10362311162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. EDWARD R BYRD

Mailing Address 17520 PAGE CT

City
YORBA LINDA

State Zip Code
CA 92886-3865

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR VP & CHF ACTG OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10362321162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH E CELENTANO

Mailing Address 26661 CAMPESINO

City
MISSION VIEJO

State Zip Code
CA 92691-6048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR VP & CHIEF RISK OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10362381162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LAURIE A CHURCH

Mailing Address 21851 NEWLAND ST SPC 246

City State Zip Code
 HUNTINGTON BEACH CA 92646-7636

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR ISS SERVICE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103624211162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. KATHLEEN A CLUNE

Mailing Address 858 S BLUEBIRD CIR

City State Zip Code
 ANAHEIM CA 92807-4404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ASST TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103624611162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DENNIS M CORBETT

Mailing Address 15136 TOURAINE WAY

City State Zip Code
 IRVINE CA 92604-3173

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP TAX COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103625111162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. DEBRA CUNNINGHAM HONERKAMP

Mailing Address 839 PROMONTORY DR W

City State Zip Code
 NEWPORT BEACH CA 92660-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP RE DEVELOPMENT & ACQUISTNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103625611162

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. PETER J CURRY

Mailing Address 1132 WINDSOR LN

City State Zip Code
 TUSTIN CA 92780-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

IT SERVICE MGMT CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103625811162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. STEPHANIE J CURRY

Mailing Address 6453 MEADOWRIDGE DR

City State Zip Code
 SANTA ROSA CA 95409-5848

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

RETIREMENT STRATEGIES CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103625911162

Amount of Each Receipt this Period

105.00

P/R Deduction (\$105.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

305.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. DIANE W DALES

Mailing Address 28 CLERMONT

City

NEWPORT COAST

State

CA

Zip Code

92657-1071

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103626011162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MARK R FALK

Mailing Address 64 SUMMERSTONE

City

IRVINE

State

CA

Zip Code

92614-7000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103627111162

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. PETER S FIEK

Mailing Address 22 ARCADE

City

IRVINE

State

CA

Zip Code

92603-0120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PORTFOLIO MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103627711162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID R FINEAR

Mailing Address 718 K THANGA DR

City

CORONA DEL MAR

State

CA

Zip Code

92625-1734

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP RE INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103627811162

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. FRANK J GOETZ

Mailing Address 7 SOVENTE

City

IRVINE

State

CA

Zip Code

92606-0830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP & ASST CHIEF UNDRWRTR ADM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103629011162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. MILDA C GOODMAN

Mailing Address 310 ALISO AVE

City

NEWPORT BEACH

State

CA

Zip Code

92663-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CORPORATE ADVERTISING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103629211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LORENE C GORDON

Mailing Address 1640 CARMELITA

City

LAGUNA BEACH

State

CA

Zip Code

92651-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP OPERATIONS & PMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103629311162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ADRIAN S GRIGGS

Mailing Address 616 NARCISSUS AVE

City

CORONA DEL MAR

State

CA

Zip Code

92625-2417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

EVP & CHIEF FIN OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103629611162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. IRENE L JACOBSEN

Mailing Address 6052 SAN YSIDRO CIR

City

BUENA PARK

State

CA

Zip Code

90620-2850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACCOUNT MGMT SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103629911162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

696.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DALE E HAWLEY

Mailing Address 1137 SUNSET CLIFFS BLVD

City State Zip Code
 SAN DIEGO CA 92107-4014

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103630711162

Amount of Each Receipt this Period

74.00

P/R Deduction (\$74.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. KEVIN A HENDRA

Mailing Address 58 VIAGGIO LN

City State Zip Code
 Foothill Ranch CA 92610-1925

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103631111162

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. SHELLY J HIGGINS

Mailing Address 33032 TESORO ST

City State Zip Code
 DANA POINT CA 92629-1332

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP ACCT SYS OPS & STRTG INIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103631511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

204.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. HOWARD T HIRAKAWA

Mailing Address 23972 GOLDENEYE DR

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP INVESTMENT ADVISOR OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103631611162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CAROL A JENSEN

Mailing Address 8554 202ND STREET SW

City

EDMONDS

State

WA

Zip Code

98026-6643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

NATL SLS MGR M CHANNEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103632411162

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JEFF R JOHNSON

Mailing Address 1 SAND OAKS RD.

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-5720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103632511162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MARK J JOHNSON

Mailing Address 1812 LEADBURN RD

City
TOWSONState Zip Code
MD 21204-1831FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103632711162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. LORI A JOHNSTONE

Mailing Address 1450 SEA RIDGE DR

City
NEWPORT BEACHState Zip Code
CA 92660-8207FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PORTFOLIO MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103632911162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. SUZANNE T KAMPA

Mailing Address 5531 STANFORD AVE

City
GARDEN GROVEState Zip Code
CA 92845-2434FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR INTERNAL AUDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103633211162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

245.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. BRIAN D KLEMENS

Mailing Address 24611 BENJAMIN CIR

City
DANA POINT

State Zip Code
CA 92629-6013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & CORPORATE CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103633711162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN P KONTOS

Mailing Address 6307 CAMINO MARINERO

City
SAN CLEMENTE

State Zip Code
CA 92673-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP SELECT MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103634211162

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. FLETCHER C LARSON

Mailing Address 709 AVENIDA MIROLA

City
PALOS VERDES ESTATES

State Zip Code
CA 90274-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103634711162

Amount of Each Receipt this Period

400.00

P/R Deduction (\$400.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

590.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. TERESA M LORD

Mailing Address 16432 CAMINO CANADA LN

City	State	Zip Code
HUNTINGTON BEACH	CA	92649-5206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR SYSTEMS ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103635411162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. LAURENE E MAC ELWEE

Mailing Address 1033 SECRETARIAT CIR

City	State	Zip Code
COSTA MESA	CA	92626-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP FUND COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103635611162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. STEPHANIE J BABKOW

Mailing Address 9901 OCEANCREST DR

City	State	Zip Code
HUNTINGTON BEACH	CA	92646-8259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP NEW BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103635811162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS J MAYS

Mailing Address 7406 PALOMA DR

City State Zip Code
HUNTINGTON BEACH CA 92648-6847

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP GOVT RELNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103636011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. GAIL H MC INTOSH

Mailing Address 622 18TH ST

City State Zip Code
HUNTINGTON BEACH CA 92648-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103636111162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT B MC KIBBIN

Mailing Address 416 W 68TH ST

City State Zip Code
KANSAS CITY MO 64113-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103636211162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

265.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MORGAN C MC KNIGHT

Mailing Address 1217 HIGHCREST DR

City

BURLESON

State

TX

Zip Code

76028-7467

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

APPLIC DEV CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103636411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CAROLYN J MIDDLEBROOKS

Mailing Address 2024 E OCEAN BLVD

City

NEWPORT BEACH

State

CA

Zip Code

92661-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & CHIEF LIFE UNDERWRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103636911162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOSE T MISCOLTA

Mailing Address 3 GRETCHEN COURT

City

ALISO VIEJO

State

CA

Zip Code

92656-5203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INVESTMENT MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR103637511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ELIZABETH A MOORE

Mailing Address 6412 N 159TH ST

City

OMAHA

State

NE

Zip Code

68116-4055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SYSTEMS ANALYSIS CONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103637611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES T MORRIS

Mailing Address 32141 COOK LN

City

SAN JUAN CAPISTRANO

State

CA

Zip Code

92675-3934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

CHAIRMAN & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103637911162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD P OLSON

Mailing Address 24902 SUNSET PL E

City

LAGUNA HILLS

State

CA

Zip Code

92653-4902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR SECURITY SVCS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103639311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

516.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JOYCE J PEAD

Mailing Address 25 SUNRISE

City

IRVINE

State

CA

Zip Code

92603-3719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP HR BUS PARTNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10364001162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. YVES F PINKOWITZ

Mailing Address 20541 VIA EL TAJO

City

YORBA LINDA

State

CA

Zip Code

92887-3202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CORP FIN & REG RPTG

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

396.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10364051162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. THEODORE A PREMIER

Mailing Address 20 MOLINO

City

NEWPORT BEACH

State

CA

Zip Code

92660-9116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP RE INVESTMENTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10364081162

Amount of Each Receipt this Period

350.00

P/R Deduction (\$350.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

480.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH A PUM

Mailing Address 33 BOLERO

City State Zip Code
MISSION VIEJO CA 92692-5160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103640911162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES R RICE

Mailing Address 11 STILLWATER

City State Zip Code
IRVINE CA 92603-3426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP M FINANCIAL DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103641411162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. THOMAS M RONCE

Mailing Address 19 GLEN ELLEN

City State Zip Code
IRVINE CA 92602-2002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & TAX COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103642011162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD J SCHINDLER

Mailing Address 28472 AVENIDA PLACIDA

City State Zip Code
 SAN JUAN CAPISTRANO CA 92675-6319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

EVP LIFE INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103642611162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. KIMBERLY K SCHULTZ

Mailing Address 28392 CALLE PINON

City State Zip Code
 SAN JUAN CAPISTRANO CA 92675-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103643011162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CATHY L SCHWARTZ

Mailing Address 87 PELICAN CT

City State Zip Code
 NEWPORT BEACH CA 92660-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2015

Transaction ID : PR103643111162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

691.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SONJA V SCOTT

Mailing Address 30 CANYONWOOD

City

IRVINE

State

CA

Zip Code

92620-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COMPENSATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103643311162

Amount of Each Receipt this Period

55.00

P/R Deduction (\$55.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. BRADLEY W SHERRELL

Mailing Address 2315 VIA ZAFIRO

City

SAN CLEMENTE

State

CA

Zip Code

92673-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP TECH OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103643511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. JOAN M SMITH

Mailing Address 33342 COVE ISLAND PL

City

DANA POINT

State

CA

Zip Code

92629-1552

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACCOUNTING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103644111162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CAROL R SUDBECK

Mailing Address 11 SOMMET

City State Zip Code
 NEWPORT COAST CA 92657-0104

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP, HR & PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103645011162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. ALICE P TERLECKY

Mailing Address 7 PLAYA CIRCLE

City State Zip Code
 ALISO VIEJO CA 92656-1621

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CLIENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103645711162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN G TORELL

Mailing Address 355 S LORETTA DR

City State Zip Code
 ORANGE CA 92869-4633

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & ASSISTANT CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103645811162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

541.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. STEPHEN J TORETO

Mailing Address 22862 ORENSE

City

MISSION VIEJO

State

CA

Zip Code

92691-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103645911162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. KHANH T TRAN

Mailing Address 47 VERNAL SPG

City

IRVINE

State

CA

Zip Code

92603-0404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103646011162

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. EDDIE D TUNG

Mailing Address PO BOX 10386

City

NEWPORT BEACH

State

CA

Zip Code

92658-0386

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP REGULATORY PRDCTS ACCT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1135.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103646211162

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

601.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CATHRYN L VAN WEY

Mailing Address 41974 CARSON CT

City

MURRIETA

State

CA

Zip Code

92562-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP NATL ACCTS & BD SVCS

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103646311162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN M WALDECK

Mailing Address 67 LAURELHURST DR

City

LADERA RANCH

State

CA

Zip Code

92694-0204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP COMMERCIAL MORTGAGE INV

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103646511162

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. NAOMI D WHEELER

Mailing Address 1827 MAIN ST

City

HUNTINGTON BEACH

State

CA

Zip Code

92648-2724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FINANCIAL ANALYSIS

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR103647311162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

541.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN WHITE

Mailing Address 28532 VIA PRIMAVERA

City State Zip Code
 SAN JUAN CAPISTRANO CA 92675-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP SALES SUPPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103647411162

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ALAN D WUEST

Mailing Address 4473 AUGUSTA DR

City State Zip Code
 OCEANSIDE CA 92057-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP OPERATIONS SUPPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103648011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. ROBIN S YONIS

Mailing Address 8 CASTLEBAR

City State Zip Code
 IRVINE CA 92618-4043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & FUND ADVISOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103648211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. REED J LLOYD

Mailing Address 84 NORTHWOODS RD

City State Zip Code
 NORTH GRANBY CT 06060-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP RETIREMENT STRATEGIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10365211162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. REX A OLSON

Mailing Address 1963 PORT LAURENT PL

City State Zip Code
 NEWPORT BEACH CA 92660-7118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP&SR MANAGING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10365221162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CYNTHIA D BARNARD

Mailing Address 510 TUSTIN AVE

City State Zip Code
 NEWPORT BEACH CA 92663-4821

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP & VALUATION ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10365291162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CAROLYN DEAN

Mailing Address PO BOX 3051

City
DANA POINT

State Zip Code
CA 92629-8051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACCOUNTING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103653411162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CAROL E RUMSEY

Mailing Address 25221 SPINDLEWOOD

City
LAGUNA NIGUEL

State Zip Code
CA 92677-1967

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FUND & ADVISOR COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103654511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. PHILIP A TEETER

Mailing Address 31422 ALTA LOMA DR

City
LAGUNA BEACH

State Zip Code
CA 92651-6926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR VP TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103654711162

Amount of Each Receipt this Period

275.00

P/R Deduction (\$275.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

415.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. TENNYSON S OYLER

Mailing Address 52 PEONY

City State Zip Code
 IRVINE CA 92618-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP BRAND MGMT & PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10365611162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. VALERIE MORRIS

Mailing Address 48 W YALE LOOP

City State Zip Code
 IRVINE CA 92604-3619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103656811162

Amount of Each Receipt this Period

110.00

P/R Deduction (\$110.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. PATRICIA S DOUGLASS

Mailing Address 640 SAINT JAMES RD

City State Zip Code
 NEWPORT BEACH CA 92663-5855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP GOVT RELNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3490.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103657311162

Amount of Each Receipt this Period

320.00

P/R Deduction (\$320.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

605.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 32 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. SILAS K DUNN

Mailing Address 14 ELDERWOOD

City	State	Zip Code
IRVINE	CA	92614-7449

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PSD COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103658411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CHRISTINA Q HE

Mailing Address 16625 SONORA STREET

City	State	Zip Code
TUSTIN	CA	92782-1939

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP INVESTMENT STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103658711162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RONALD S KLINGE

Mailing Address 1428 GLENNEYRE ST

City	State	Zip Code
LAGUNA BEACH	CA	92651-3132

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

MGR PRODUCTION SUPPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR103659211162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ERIC B MILLS

Mailing Address 25202 LA ESTRADA DR

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP ADVANCE DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103659511162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN F O'DONNELL

Mailing Address 24566 MOONFIRE DR

City

DANA POINT

State

CA

Zip Code

92629-1779

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103659611162

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. EVAN P OHS

Mailing Address 234 VALLECITO CT

City

WALNUT CREEK

State

CA

Zip Code

94596-5870

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103659711162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JULIET A PINKERTON

Mailing Address 5874 GARRISON RD

City
FRANKLIN

State Zip Code
TN 37064-9242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIVISIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103659911162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. PHILLIP L SALEMNO

Mailing Address 47 BETSY LN

City
AMBLER

State Zip Code
PA 19002-5737

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103660311162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD A TAUBE

Mailing Address 24081 NUTHATCH LN

City
LAGUNA NIGUEL

State Zip Code
CA 92677-1382

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP INSTITUTIONAL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103660411162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. TRAVIS R MC KAY

Mailing Address 48 GOLF AVE

City State Zip Code
 CLARENDON HILLS IL 60514-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366061162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. KATHARINE B YOUNG

Mailing Address 18647 SANTA ISADORA ST

City State Zip Code
 FOUNTAIN VALLEY CA 92708-6232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP VALUATION & RISK MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2280.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366101162

Amount of Each Receipt this Period

210.00

P/R Deduction (\$210.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. CHRISTOPHER VAN MIERLO

Mailing Address 400 EL VUELO

City State Zip Code
 SAN CLEMENTE CA 92672-7513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP RSD SALES CHF MKTG OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366151162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

801.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DOUGLAS J URATA

Mailing Address 28202 MILLWOOD RD

City State Zip Code
TRABUCO CANYON CA 92679-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ISP MKTG ASSOC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366161162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM B ARMSTRONG

Mailing Address 2910 PORTADA AVE

City State Zip Code
HENDERSON NV 89074-2844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366221162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD M WILKES

Mailing Address 11144 SAGE CREEK DR

City State Zip Code
GALENA OH 43021-8007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10366271162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD S BANNO

Mailing Address 26666 WHITE OAKS DR

City

LAGUNA HILLS

State

CA

Zip Code

92653-7577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP RE SECURITIES & RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103662811162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. THOMAS C BILELLO

Mailing Address 9752 WILLOW GLENN CIR

City

NORTH TUSTIN

State

CA

Zip Code

92705-6104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103662911162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. STEPHEN M BOLLINGER

Mailing Address 17345 FLAME TREE CIR

City

FOUNTAIN VALLEY

State

CA

Zip Code

92708-3521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663011162

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MARY ANN BROWN

Mailing Address 304 WEYMOUTH PL

City

LAGUNA BEACH

State

CA

Zip Code

92651-1455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

EVP CORPORATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.26

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663111162

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. LORI K CARRASCO

Mailing Address 2742 PORTOLA DR

City

COSTA MESA

State

CA

Zip Code

92626-5819

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ASST CORP SECRETARY DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. SIMON S FENG

Mailing Address 10 CANDELA

City

IRVINE

State

CA

Zip Code

92620-1823

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP BUS & TECH INTEG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663511162

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

666.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS GIBBONS

Mailing Address 1970 PARK NEWPORT

City State Zip Code
 NEWPORT BEACH CA 92660-5068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP, TREASURY TAX & ENTERPRISE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663611162

Amount of Each Receipt this Period

365.00

P/R Deduction (\$365.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. MARY M HAWKINS

Mailing Address 6182 S 177TH ST

City State Zip Code
 OMAHA NE 68135-2897

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP OPS BUS SOLUTNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103663911162

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MARK A KARPE

Mailing Address 16 AUTUMNLEAF

City State Zip Code
 IRVINE CA 92614-7596

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103664111162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

535.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. GREGORY L KEELING

Mailing Address 325 LA JOLLA DR #2

City	State	Zip Code
NEWPORT BEACH	CA	92663-4143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR10366421162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOSEPH W KRUM

Mailing Address 43 LEMANS

City	State	Zip Code
NEWPORT COAST	CA	92657-0115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR10366441162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. DARCY L LEWIS

Mailing Address 2740 DOMINGO RD

City	State	Zip Code
FULLERTON	CA	92835-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR10366451162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. STEPHAN P MITCHELL

Mailing Address 31870 PASEO NAVARRA

City State Zip Code
 SAN JUAN CAPISTRANO CA 92675-3651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

PRODUCT SPEC DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103664611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. CHAD A ROSS

Mailing Address 1667 ALTA VISTA DR

City State Zip Code
 VISTA CA 92084-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR BROKER DEALER SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103664911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID K ROSUCK

Mailing Address 20 SAINT JOHN DR

City State Zip Code
 HAWTHORN WOODS IL 60047-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP MKTG COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103665011162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 42 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PATRICIA A SANDBERG

Mailing Address PO BOX 41205

City

LONG BEACH

State

CA

Zip Code

90853-1205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103665211162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. ELIZABETH H SKINNER

Mailing Address 57 CORAL LK

City

IRVINE

State

CA

Zip Code

92614-5487

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103665511162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CHERYL L TOBIN

Mailing Address 24426 PEACOCK ST

City

LAKE FOREST

State

CA

Zip Code

92630-1864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103665711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 120

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CATHLEEN H PULFORD

Mailing Address 33742 PEQUITO DR

City
DANA POINTState Zip Code
CA 92629-2034FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REG RPTG & ANA CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR103666111162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DENNIS L BAHLMANN

Mailing Address 6052 MEADOW VIEW CT

City
JOHNSTONState Zip Code
IA 50131-3053FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

LIFE UNDRWRTNG CONS II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR103666211162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. KEVIN W BERWALD

Mailing Address 17601 PARKE LN

City
GROSSE ILEState Zip Code
MI 48138-1046FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR103666311162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 44 OF 120
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. GEORGE A PAULIK

Mailing Address 314 ROLLING ROCK RD SE

City	State	Zip Code
MARIETTA	GA	30067-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR FVP-NCM IP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR10366511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JEFF J BRADSHAW

Mailing Address 22081 OAK GRV

City	State	Zip Code
MISSION VIEJO	CA	92692-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CORP DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103666711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. KAREN M BROWN

Mailing Address 1230 FOWLER CREEK RD

City	State	Zip Code
SONOMA	CA	95476-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP MODEL OFC ANN TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103666911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 45 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. STEVEN R ELDER

Mailing Address 385 25TH AVE

City
MILTONState
WAZip Code
98354-9359FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR10366721162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. STEPHEN K ENG

Mailing Address 5 PURPLE SAGE

City
IRVINEState
CAZip Code
92603-3706FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR RISK MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR10366731162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT GOLDSTONE

Mailing Address 227 ORCHID AVE

City
CORONA DEL MARState
CAZip Code
92625-3013FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CHIEF MED OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR10366741162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CHARLENE A GRANT

Mailing Address 3311 SEAVIEW AVE

City

CORONA DEL MAR

State

CA

Zip Code

92625-3056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103667511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID C HONERKAMP

Mailing Address 839 PROMONTORY DR W

City

NEWPORT BEACH

State

CA

Zip Code

92660-7361

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP RE ASSET MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103667611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. KRISTINA L KENNEDY

Mailing Address 6 CAMARIN ST

City

FOOTHILL RANCH

State

CA

Zip Code

92610-1939

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP ACTUARIAL & APPOINTED ACTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103667811162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 120
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SHARON E PACHECO

Mailing Address 21611 BLUEJAY ST

City State Zip Code
 TRABUCO CANYON CA 92679-3469

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CHIEF COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103668211162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. DAWN M TRAUTMAN

Mailing Address 308 REGATTA WAY

City State Zip Code
 SEAL BEACH CA 90740-5985

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP PRODUCT MGT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103668611162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM K VINSON

Mailing Address 74 TROFELLO LN

City State Zip Code
 ALISO VIEJO CA 92656-6216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACTUARIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103668711162

Amount of Each Receipt this Period

24.00

P/R Deduction (\$24.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

314.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 48 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JEFFREY R WILT

Mailing Address 1 BAILEY DR

 City
 GLENWOOD

 State
 NJ

 Zip Code
 07418-1024

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103668811162

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. STUART A HOLLAND

Mailing Address 4931 CAREFREE TRAIL

 City
 PARKER

 State
 CO

 Zip Code
 80134-5240

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP RETAIL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103669111162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. BRANDON J CAGE

Mailing Address 31885 OLD OAK RD

 City
 TRABUCO CANYON

 State
 CA

 Zip Code
 92679-3245

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103669511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

340.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 120

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. LARRY D GARDNER

Mailing Address 214 S 202ND ST

City
ELKHORN

State Zip Code
NE 68022-4898

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REG COMPLIANCE CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103669911162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID L GOLDSTEIN

Mailing Address 12324 CANTURA ST

City
STUDIO CITY

State Zip Code
CA 91604-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP COLI UNIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103670111162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. CHIN H KIM

Mailing Address 18 AMANTES

City
RANCHO SANTA MARGARITA

State Zip Code
CA 92688-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ADVANCED MRKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103670211162

Amount of Each Receipt this Period

120.00

P/R Deduction (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. WAYNE K LEE

Mailing Address 10158 NADINE ST

City

TEMPLE CITY

State

CA

Zip Code

91780-2725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DATABASE MGMT CONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103670411162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. RONALD C SEXTON

Mailing Address 2800 KELLER DR APT 50

City

TUSTIN

State

CA

Zip Code

92782-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR DATABASE ADMINISTR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103670911162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. KEITH C WERSCHKE

Mailing Address 25252 NORTHRUP DR

City

LAGUNA HILLS

State

CA

Zip Code

92653-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP RSD RISK MGMT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR103671211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JIM Y CHU

Mailing Address 22931 GALAXY LN

City
LAKE FOREST

State Zip Code
CA 92630-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PRICING & DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103671411162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. TIFFANY L GREGATH

Mailing Address 2820 CAMINO CAPISTRANO APT D

City
SAN CLEMENTE

State Zip Code
CA 92672-4812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP MARKETING SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103671511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. STEVEN H GOLDBERG

Mailing Address 11 TWIN FLOWER ST

City
LADERA RANCH

State Zip Code
CA 92694-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

PRODUCT MGMT DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR103671811162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JASON T TODD

Mailing Address 15 LEWISTON CT

City

LADERA RANCH

State

CA

Zip Code

92694-0532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10371991162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MADHU VIJAY

Mailing Address 2 SKYGATE

City

ALISO VIEJO

State

CA

Zip Code

92656-1820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

EVP & CHIEF FIN OFCR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10614751162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT J AVELLINO

Mailing Address 3 PHEASANT DR.

City

MOUNT LAUREL

State

NJ

Zip Code

08054-5302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR10614781162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CARLETON J MUENCH

Mailing Address 111 NORTHERN PINE LOOP

City

ALISO VIEJO

State

CA

Zip Code

92656-6056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP INVESTMENT OVERSIGHT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR106148311162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. TIM N SHAHEEN

Mailing Address 27621 HOMESTEAD RD

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-6603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP SHARED SVCS & STRAT PLNG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR106148711162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL J DONNELLY

Mailing Address 16 GARDEN TER

City

WALPOLE

State

MA

Zip Code

02081-3771

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR106679911162

Amount of Each Receipt this Period

33.00

P/R Deduction (\$33.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

253.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JAMES P LEASURE

Mailing Address 2427 PORT WHITBY PL

City	State	Zip Code
NEWPORT BEACH	CA	92660-5435

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP&SR MANAGING DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR106680111162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES F SHERIDAN

Mailing Address 9584 ROBIN AVE

City	State	Zip Code
FOUNTAIN VALLEY	CA	92708-7250

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR ACG/AIRCRAFT SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR110846911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID J VAN DE WATER

Mailing Address 6433 PALOMINO WAY

City	State	Zip Code
WEST LINN	OR	97068-2244

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR111068911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ANN E FARLEY

Mailing Address 4014 ALADDIN DR

City State Zip Code
HUNTINGTON BEACH CA 92649-4225

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INNOVATION MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR113233511162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. ANN M DELANEY

Mailing Address 9 GRENADA ST

City State Zip Code
LAGUNA NIGUEL CA 92677-4825

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

PROJECT MGMT CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR123619311162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ROGER D BOND

Mailing Address 225 SAN TROPEZ CT.

City State Zip Code
LAGUNA BEACH CA 92651-4417

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR PROFESSIONAL PRACTICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR155988911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ANDREW OLEKSIW

Mailing Address 22 SKY RANCH RD

City

LADERA RANCH

State

CA

Zip Code

92694-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP CORP DEVELPMT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR155989011162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. RAE A MCKEATING

Mailing Address 25842 DANA BLF W

City

CAPISTRANO BEACH

State

CA

Zip Code

92624-1219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP GENERAL COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR221307111162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. CHRISTOPHER S DALLAS

Mailing Address 23 EARLYMORN

City

IRVINE

State

CA

Zip Code

92614-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR221307311162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. EDWIN J FERRELL

Mailing Address 34 CASTLEROCK

City

IRVINE

State

CA

Zip Code

92603-0153

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP INVSTMT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR221307511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. JENELLE J FRANKLIN

Mailing Address 6131 COSTA DEL REY

City

LONG BEACH

State

CA

Zip Code

90803-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ITCG AUDIT MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR221307611162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DONAL P HANLEY

Mailing Address 1110 SCHOLARSHIP

City

IRVINE

State

CA

Zip Code

92612-5682

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

MANAGING DIRECTOR & VP LEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR221307711162

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

151.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. NANCY A HILL

Mailing Address 9 AMBERWICKE

City

DOVE CANYON

State

CA

Zip Code

92679-3742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP REGULATORY COMPLIANCE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

495.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221307811162

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DENIS P KALSCHEUR

Mailing Address 15 BELMONT

City

NEWPORT BEACH

State

CA

Zip Code

92660-6732

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACG CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4576.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221307911162

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. JENNIFER L ST ONGE

Mailing Address 3 GIVERNY

City

NEWPORT COAST

State

CA

Zip Code

92657-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FIN & DERIVATIVE RPTG

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221308011162

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

531.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. GUY M MOCKELMAN

Mailing Address 4227 N BRANCH DR

City State Zip Code
 OMAHA NE 68116-2952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR CHANNEL SALES TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221308311162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. TIMOTHY C MYERS

Mailing Address 9 TROFELLO LN

City State Zip Code
 ALISO VIEJO CA 92656-6215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

CORP TAX DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221308611162

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. SCOTT P ROBINSON

Mailing Address 10429 MORNING LIGHT CT

City State Zip Code
 SOUTH LYON MI 48178-8055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR221308811162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JAY C HAMILTON

Mailing Address 14 ARGOS

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-9003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP CONTRACTS & CONFIGURATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR223363511162

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. SHEPHEARD M JAMES

Mailing Address 18030 BROOKHURST ST.

City

FOUNTAIN VALLEY

State

CA

Zip Code

92708-6756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR223363611162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL L ADAMS

Mailing Address 11013 CHARMWOOD DR

City

RIVERVIEW

State

FL

Zip Code

33569-6252

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP M MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR234308811162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 120
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD J MILLER

Mailing Address 2628 RYCROFT CT

City

CHESTERFIELD

State

MO

Zip Code

63017-7108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP BUSINESS DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR317368411162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DOUGLAS P JACKSON

Mailing Address 59 AUGUSTA

City

COTO DE CAZA

State

CA

Zip Code

92679-4829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PROD MGMT & SALES SPPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR327771211162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM D BELL

Mailing Address 12123 COURSER AVE

City

LA MIRADA

State

CA

Zip Code

90638-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ADVANCED DESIGNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR336778411162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KATHRYN N HENSLER

Mailing Address 24372 ENCORVADO LN

City

MISSION VIEJO

State

CA

Zip Code

92691-4025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR336778711162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DANIEL E KOMOROSKE

Mailing Address 8 OSPREY AVE

City

ALISO VIEJO

State

CA

Zip Code

92656-1772

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP LIFE REINSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR336778811162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DEAN R LAGERBORG

Mailing Address 58 BRISA FRESCA

City

RANCHO SANTA MARGARITA

State

CA

Zip Code

92688-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR CS ACCESS & SVC MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR336778911162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ADRIENNE MOUCH

Mailing Address 2524 W WATROUS AVE

City
TAMPAState
FLZip Code
33629-5345FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR336779011162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. KAREN L MOYER

Mailing Address 4821 SUNNYBROOK AVE

City

BUENA PARK

State

CA

Zip Code

90621-1044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR SYSTEMS ANA (LD)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR336779111162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. BRIAN D PEAD

Mailing Address 25 SUNRISE

City

IRVINE

State

CA

Zip Code

92603-3719

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP APPL ARCH & INTEG.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR336779411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

265.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JEFFREY S PHILLIPS

Mailing Address 14932 PENFIELD CIR

City State Zip Code
HUNTINGTON BEACH CA 92647-2319

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

PROJECT MGMT CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336779511162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JON W RUELLE

Mailing Address 3273 CALIFORNIA ST

City State Zip Code
COSTA MESA CA 92626-2200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DATA GOVERNANCE CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336779711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. PARAG S SHAH

Mailing Address 24972 FOOTPATH LN

City State Zip Code
LAGUNA NIGUEL CA 92677-6000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP PRODUCT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336779811162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KARI S TURIGLIATTO

Mailing Address 253 NIETO AVE

City

LONG BEACH

State

CA

Zip Code

90803-5522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336779911162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. DEIDRE B BECKLEY

Mailing Address 24215 SPARKLING SPRING LN

City

LAKE FOREST

State

CA

Zip Code

92630-3685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SUPR OPS COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336780111162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES P WITKOWSKI

Mailing Address 5620 FOXTAIL LOOP

City

CARLSBAD

State

CA

Zip Code

92010-7154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

CHANNEL MKTG DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR336780211162

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL F MIRANNE

Mailing Address 153 SHUTE CIR

City

OLD HICKORY

State

TN

Zip Code

37138-1956

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR FVP NSM FI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR344191511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. KEVIN RODDY

Mailing Address 23221 VIA DORADO

City

COTO DE CAZA

State

CA

Zip Code

92679-3922

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR VP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR383708911162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WESLEY G AKINS

Mailing Address 9 BROOKDALE

City

IRVINE

State

CA

Zip Code

92604-3312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR BUS ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR435821911162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DANIEL J KUBICA

Mailing Address 26362 YOLANDA ST

City

LAGUNA HILLS

State

CA

Zip Code

92656-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR FLD FIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR435822611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CARLA M MILLER

Mailing Address 2116 BARLASS DR

City

ROCKWALL

State

TX

Zip Code

75087-7138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FIELD VICE PRES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR435822711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RANDALL D MOODY

Mailing Address 600 E. ELM ST.

City

BREA

State

CA

Zip Code

92821-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

CONSTRUCTION SVCS MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR435822811162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH J NICOLOSI

Mailing Address 5865 E ANDOVER DR

City

HANOVER PARK

State

IL

Zip Code

60133-5240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FIELD VICE PRES

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR435822911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. CHRISTIAN J PHANCO

Mailing Address 18710 ORIENTE DR

City

YORBA LINDA

State

CA

Zip Code

92886-2555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR435823111162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. LAURYN D SMITH

Mailing Address 17870 NEWHOPE ST

City

FOUNTAIN VALLEY

State

CA

Zip Code

92708-5439

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR PAYROLL TAX ANA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR435823411162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. VINCENT A SPERA

Mailing Address 1616 LOOKOUT CIR

City
WAXHAW

State Zip Code
NC 28173-8085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR435823511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT S EDWARDS

Mailing Address 9631 MITCHELL PL

City
BRENTWOOD

State Zip Code
TN 37027-8483

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR482322111162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. JOANNE T GAGNON

Mailing Address 403 S SAPODILLA AVE

City
WEST PALM BEACH

State Zip Code
FL 33401-5765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP M MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR482322211162

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

267.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. TERESA A OSBORN

Mailing Address 135 ROSEBUD LN

City

COUNCIL BLUFFS

State

IA

Zip Code

51503-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SUPR INFORCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR482322511162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. GARY D PENCE

Mailing Address 27691 BLOSSOM HILL RD

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-6012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

MGR ADVANCED MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR482322611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID T CHANG

Mailing Address 18 IROQUOIS CT

City

IRVINE

State

CA

Zip Code

92602-0751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP SR QUANTITATIVE STRATEGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : PR595292511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN F TRUJILLO

Mailing Address 650 E CHASE DR

City
CORONA

State
CA

Zip Code
92881-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP SYSTEMS ADMIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR595292711162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT V IPPOLITO

Mailing Address 6276 WINGSPAN WAY

City
BRADENTON

State
FL

Zip Code
34203-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR607505011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. CADE H CHERRY

Mailing Address 20 ESTERO POINTE

City
ALISO VIEJO

State
CA

Zip Code
92656-7040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FIELD FINANCIAL MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611258811162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JENNIFER B COOK

Mailing Address 446 ENCLAVE CIR

City

COSTA MESA

State

CA

Zip Code

92626-8219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACCOUNT MGMT SPEC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611258911162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. GARY L FALDE

Mailing Address 9212 SANTIAGO DR

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-6342

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & CHIEF ACTUARY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259011162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM D MARTINEAU

Mailing Address 9691 WOODLAWN DRIVE

City

HUNTINGTON BEACH

State

CA

Zip Code

92646-3635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP APPLIC DEV

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259311162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SUSAN S PECK

Mailing Address 12521 WEDGWOOD CIR.

City State Zip Code
TUSTIN CA 92780-2879

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. BRIAN W REEVES

Mailing Address 217 AVENUE B

City State Zip Code
REDONDO BEACH CA 90277-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CORPORATE FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259511162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. RALPH D SCHOCH

Mailing Address 3443 CROOKED CREEK DR

City State Zip Code
DIAMOND BAR CA 91765-3720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR APPLIC DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259611162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. REBECCA S WARWAR

Mailing Address 196 S SAGEWOOD ST

City
ORANGE

State
CA

Zip Code
92869-5614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR DC & MAINFRAME SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR611259711162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT A CHORZEWSKI

Mailing Address 21542 KENMARE DR

City
LAKE FOREST

State
CA

Zip Code
92630-6078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VAR PROD ACCTNG DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR678850311162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WESLEY J FARNER

Mailing Address 42 MERIDIAN DR

City
ALISO VIEJO

State
CA

Zip Code
92656-2696

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR FINANCIAL ANALYST II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR678850411162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. TRISTAN L FONTUGNE

Mailing Address 6 SCHUBERT CT

City

IRVINE

State

CA

Zip Code

92617-4036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR & ACTUARY PROD DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR678850511162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MATTHEW L HANSBERGER

Mailing Address 5516 RIVER AVE

City

NEWPORT BEACH

State

CA

Zip Code

92663-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP OPEN SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR678850611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MATTHEW A LEVENE

Mailing Address 22131 CHERRYWOOD

City

MISSION VIEJO

State

CA

Zip Code

92692-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CREDIT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR678850711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MICHELLE P O'HAREN

Mailing Address 790 N COAST HWY

City

LAGUNA BEACH

State

CA

Zip Code

92651-1403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ADVANCED SALES CONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR678850811162

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. JESSICA L RICE

Mailing Address 511 S 51ST AVE

City

OMAHA

State

NE

Zip Code

68106-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INTERNAL WHOLESALING

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR678851011162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JEREMY M SMITH

Mailing Address 55 CHADBOURNE RD

City

ROCHESTER

State

NY

Zip Code

14618-1107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR678851111162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

185.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KEVIN W STEINER

Mailing Address 211 DETROIT AVE

City State Zip Code
HUNTINGTON BEACH CA 92648-5218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FUND COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR678851211162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN M CHURCH

Mailing Address 19011 WOODLAND WAY

City State Zip Code
TRABUCO CANYON CA 92679-1079

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

PRODUCT MKTG SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR680011811162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ALEXANDER F MUNRO

Mailing Address 8 HILLSBOROUGH

City State Zip Code
NEWPORT BEACH CA 92660-6733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ENTERPRISE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR680012011162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KORY J OLSEN

Mailing Address 20241 BRENTSTONE LN

City State Zip Code
HUNTINGTON BEACH CA 92646-5118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ACTUARIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR691190611162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. SARAH A JARVIS

Mailing Address 10209 HOLBURN DR

City State Zip Code
HUNTINGTON BEACH CA 92646-4346

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR701457111162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. AUTUMN C VILANDER

Mailing Address 6446 BELLE AVE

City State Zip Code
BUENA PARK CA 90620-4325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR MARKET CONDUCT COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR701457211162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KIM R CUNNINGHAM

Mailing Address 15117 SPECTRUM

City

IRVINE

State

CA

Zip Code

92618-3426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71312911162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID N FANGER

Mailing Address 817 10TH ST

City

SANTA MONICA

State

CA

Zip Code

90403-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP CORP DEV FIN ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71312921162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. JANE B FORBES

Mailing Address 3376 CUMBERLAND LN

City

FRISCO

State

TX

Zip Code

75033-2376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

LTC REGIONAL DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71312931162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JANE M GUON

Mailing Address 5 SPRINGWOOD

City State Zip Code
 IRVINE CA 92604-4650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR713129511162

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JACQUES HUNTER

Mailing Address 1215 GOLDENROD AVE

City State Zip Code
 CORONA DEL MAR CA 92625-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR FVP NSM RW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR713129611162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH KORDOVI

Mailing Address 11 SUNRIVER

City State Zip Code
 IRVINE CA 92614-5402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PRODUCT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR713129711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH A NAGEL

Mailing Address 23995 PIRAGUA PL

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-4233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP & CONTROLLER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71312981162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. KATHLEEN J MELGAR

Mailing Address 2821 MONTEREY AVE

City

COSTA MESA

State

CA

Zip Code

92626-5534

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP PRODUCT DELIVERY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

950.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71313001162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. FRANK J ZHANG

Mailing Address 28 ANACAPA LN

City

ALISO VIEJO

State

CA

Zip Code

92656-1630

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP RISK STRATEGY & POLICY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR71313011162

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

310.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RUSSELL S PROCTOR

Mailing Address 9 NORTHERN PINE LOOP

City

ALISO VIEJO

State

CA

Zip Code

92656-6034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR PENSION SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR714269911162

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID L SCHAFER

Mailing Address 3215 W FIELDER ST

City

TAMPA

State

FL

Zip Code

33611-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR720479411162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. KEVIN R BYRNE

Mailing Address 2110 CATALINA ST

City

LAGUNA BEACH

State

CA

Zip Code

92651-3677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR VP FINANCE & RISK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508111162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN R CRUISE

Mailing Address 4348 WAIALAE AVE #507

City
HONOLULU

State Zip Code
HI 96816-5767

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508211162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MATTHEW C DOMICH

Mailing Address 3553 S ALBION ST

City
CHERRY HILLS VILLAGE

State Zip Code
CO 80113-4203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES L EHRET

Mailing Address 6815 TRAFALGAR LOOP

City
DUBLIN

State Zip Code
OH 43016-8316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508411162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RYAN J JOHNSON

Mailing Address 4531 NINA LN

City
MIDDLETON

State Zip Code
WI 53562-5325

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DOUGLAS E KALMEY

Mailing Address 314 CORALBERRY RD.

City
LOUISVILLE

State Zip Code
KY 40207-5704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. THOMAS M KELLY

Mailing Address 779 ALDEN LN

City
LIVERMORE

State Zip Code
CA 94550-4752

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723508711162

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID L LAUTENSCHLAGER

Mailing Address 22192 BROOKPINE

City State Zip Code
MISSION VIEJO CA 92692-1084

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP PRODUCT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : PR723508811162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. THOMAS R MARKS

Mailing Address 203 DIERKS DR

City State Zip Code
WESTERN SPRINGS IL 60558-2030

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : PR723508911162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JONATHAN H WALKER

Mailing Address 99 SKYLINE TERRACE

City State Zip Code
MILL VALLEY CA 94941-3484

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : PR723509211162

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JASON P WOLF

Mailing Address 21817 NE 97TH PL

City
REDMOND

State
WA

Zip Code
98053-7689

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723509311162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. SUSAN A WOOD

Mailing Address 809 GREER ST

City
COVINGTON

State
KY

Zip Code
41011-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ADVANCED SALES CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723509411162

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. BRIAN T WOOLFOLK

Mailing Address 828 S 182ND ST

City
ELKHORN

State
NE

Zip Code
68022-5707

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP PRICING & PRODUCT DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR723509511162

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. BRAYDON J VAUGHN

Mailing Address 8 OSTERVILLE ST

City

LADERA RANCH

State

CA

Zip Code

92694-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP M MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR724724911162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. RICHARD V HEWLETT

Mailing Address 4543 MIDDLE RD

City

ALLISON PARK

State

PA

Zip Code

15101-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR726468311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES B CLINKSCALES

Mailing Address 3408 AUTUMN CT

City

FORT WORTH

State

TX

Zip Code

76109-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR737236511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL J DOUGHERTY

Mailing Address 76 MANCHESTER DR

City	State	Zip Code
BASKING RIDGE	NJ	07920-1210

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR739885211162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DENNIS P BARRY

Mailing Address 18921 VISTA PORTOLA

City	State	Zip Code
TRABUCO CANYON	CA	92679-1102

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

IT APPLIC DEV MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR749794311162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. FRANK L BECERRA

Mailing Address 2004 VIA AGUILA

City	State	Zip Code
SAN CLEMENTE	CA	92673-5670

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR NETWORK & STORAGE SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR749794411162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KEITH A BUCK

Mailing Address 27743 HOMESTEAD RD

City State Zip Code
LAGUNA NIGUEL CA 92677-3762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ADVANCED DESIGNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749794511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN C DALTON

Mailing Address 18867 MOUNT MORGAN CIR

City State Zip Code
FOUNTAIN VALLEY CA 92708-6517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR APPLIC DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749794811162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. NICHOLAS K DRAKE

Mailing Address 2289 AUDEN PL

City State Zip Code
CARLSBAD CA 92008-3856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

CREATIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749795011162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS S ERICKSON

Mailing Address 15018 WIRT CIR

City

OMAHA

State

NE

Zip Code

68116-6166

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

IW MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749795211162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. GREGORY P POTTER

Mailing Address 145 WHISPERING PINE WAY

City

EXETER

State

RI

Zip Code

02822-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR COPYWRITER SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749795811162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN G REBER

Mailing Address 507 VIA EL RISCO

City

SAN CLEMENTE

State

CA

Zip Code

92673-6608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP REG'L LIFE OFFICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749795911162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. RANIA C SARKIS

Mailing Address 1070 NORIA ST

City

LAGUNA BEACH

State

CA

Zip Code

92651-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ADVD DESIGN MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749796011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. BIANCA M CAMPMAN

Mailing Address 58 BORGHESE

City

IRVINE

State

CA

Zip Code

92618-0113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ACCOUNT MGMT SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749796111162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOSHUA D SCOTT

Mailing Address 30 ORION WAY

City

COTO DE CAZA

State

CA

Zip Code

92679-5116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP FIN PLNG & ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.26

Date of Receipt

11 / 30 / 2015

Transaction ID : PR749796211162

Amount of Each Receipt this Period

41.66

P/R Deduction (\$41.66 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH C LEE

Mailing Address 1244 BRIDLE ESTATES DR

City
YARDLEY

State
PA

Zip Code
19067-3957

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

NATL SLS MGR WIREHOUSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR751591211162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. TIMOTHY F SHONTERE

Mailing Address 24642 BENJAMIN CIR

City

DANA POINT

State

CA

Zip Code

92629-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP EMPLOYEE RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR751591311162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. BRYAN L BOND

Mailing Address 22391 GRAVINO

City

LAGUNA HILLS

State

CA

Zip Code

92653-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR LIFE OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR754273511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHRISTOPHER R CAIRNS

Mailing Address 8008 PASEO ESMERADO

City	State	Zip Code
CARLSBAD	CA	92009-9800

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIVISIONAL VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR754273611162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. CHRISTOPHER T RITONDO

Mailing Address 46 TIMBERNECK DR

City	State	Zip Code
READING	MA	01867-1845

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP NATIONAL ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR754273711162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MATTHEW M HOSKINS

Mailing Address 28021 ENCANTO

City	State	Zip Code
MISSION VIEJO	CA	92692-2611

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR DIR NAT'L ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR766632611162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶

315.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. STARLA C YAMAUCHI

Mailing Address 20 CALAIS

City

IRVINE

State

CA

Zip Code

92602-1666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ASST CORP SECRETARY CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR766633011162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN P ANGEL

Mailing Address 460 S POPLAR AVE

City

ELMHURST

State

IL

Zip Code

60126-4014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799017911162

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM C BARCLAY

Mailing Address 779 OLD COUNTRY RD

City

WESTPORT

State

MA

Zip Code

02790-1168

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799018011162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. WILLIAM G BEAGLE

Mailing Address 1 TOSCANY

City	State	Zip Code
IRVINE	CA	92614-0248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR MF STRATEGIC PLATFORMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR79901811162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MATTHEW R BOKOSKY

Mailing Address 171 E 18TH ST

City	State	Zip Code
COSTA MESA	CA	92627-3058

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR DIR NAT'L ACCTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR79901821162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN J CONOVER

Mailing Address 145 LINDEN DR

City	State	Zip Code
BASKING RIDGE	NJ	07920-1964

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : PR79901851162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KURT A DAMRON

Mailing Address 9563 HAMPTON RESERVE DR

City
BRENTWOOD

State Zip Code
TN 37027-8485

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799018711162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. ERICK R KROSKY

Mailing Address 1315 E SAINT JOHN RD

City
PHOENIX

State Zip Code
AZ 85022-2069

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799019011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. KENNETH A MCCLINTOCK

Mailing Address 3915 BELL HOLLOW LN

City
KATY

State Zip Code
TX 77494-2455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799019111162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. FRANCIS X MURPHY

Mailing Address 18909 RIVER FALLS DR

City
DAVIDSON

State Zip Code
NC 28036-8857

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799019211162

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN C TEMME

Mailing Address 3352 FALLING WATER CT

City
SIMI VALLEY

State Zip Code
CA 93063-5749

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799019311162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. WALTER B ZINYCH

Mailing Address 1376 HELLER DR

City
YARDLEY

State Zip Code
PA 19067-2714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR799019511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MARK S CAMPISANO

Mailing Address 6 BETHANY

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-2931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR801927311162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. STUART I HUTCHINS

Mailing Address 7997 S FAIRFAX CT

City

CENTENNIAL

State

CO

Zip Code

80122-3883

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR801927411162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. SAMUEL E MASEMER

Mailing Address 225 CALEB DR

City

WEST CHESTER

State

PA

Zip Code

19382-6177

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP INVESTMENT SPEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR805019111162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN H SHIRIKIAN

Mailing Address 25196 VIA VERACRUZ

City

LAGUNA NIGUEL

State

CA

Zip Code

92677-7349

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

GOV RELATIONS CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR812523311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID M DIANTONIO

Mailing Address 416 COLONIAL AVE

City

WESTFIELD

State

NJ

Zip Code

07090-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821860211162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN T DIECK

Mailing Address 7 LOAM

City

COTO DE CAZA

State

CA

Zip Code

92679-5225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP AGGREGATE RISK MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821860311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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FOR LINE NUMBER: PAGE 100 OF 120

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. DANIELLE S GRAY

Mailing Address 17350 RIDGEDALE LN

City

YORBA LINDA

State

CA

Zip Code

92886-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

HR RECRUITING CONS

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR821860411162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID M LANGAN

Mailing Address 14 ANNESLEY DR

City

GLEN MILLS

State

PA

Zip Code

19342-1357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR821860511162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL W MCHARGUE

Mailing Address 1765 BLACKHAWK DR

City

LINCOLN

State

NE

Zip Code

68521-9085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

IW CHANNEL DIRECTOR

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015

Transaction ID : PR821860611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

245.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. HUGH M MENIN

Mailing Address 9861 E PINWOOD AVE

City
ENGLEWOOD

State Zip Code
CO 80111-5446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR PENSION SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821860711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. CATHY J MORRIS

Mailing Address 1431 S 123RD ST

City
OMAHA

State Zip Code
NE 68144-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

IW SALES DESK DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821860811162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. ARTHUR V PANIGHETTI

Mailing Address 405 PROMONTORY DR E

City
NEWPORT BEACH

State Zip Code
CA 92660-7447

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP REGULATORY PROJECT (ERM)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821860911162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID M RUIZ

Mailing Address 23 PASEO BREZO

City	State	Zip Code
RANCHO SANTA MARGARITA	CA	92688-2867

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP VALUATION ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR821861011162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JOSEPH S SAMPLES

Mailing Address 21102 GALBAR CIR

City	State	Zip Code
HUNTINGTON BEACH	CA	92646-7412

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP FIN RPTG & ANA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR821861111162

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. DEREK C SUTER

Mailing Address 14067 WHEELING CT

City	State	Zip Code
FISHERS	IN	46038-4530

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Life

Occupation

KEY ACCTS MKTG DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR821861211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PATRICIA A THOMPSON

Mailing Address 1024 BAYSIDE DRIVE

City State Zip Code
NEWPORT BEACH CA 92660-7462

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

REGULATORY COMPLIANCE DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR821861311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. JULIE A AHLERT

Mailing Address 2465 VISTA HUERTA

City State Zip Code
NEWPORT BEACH CA 92660-4039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR ACCTG & FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR823372511162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. T. REED BONNER

Mailing Address 853 FARM QUARTER RD

City State Zip Code
MOUNT PLEASANT SC 29464-9552

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR826843211162

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMASITO N PIEDAD

Mailing Address 24 CIPRESSO

City State Zip Code
 IRVINE CA 92618-0105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP SR QUANTITATIVE STRATEGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR826843411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. TIM J STEIERT

Mailing Address 28411 LAS ARUBAS

City State Zip Code
 LAGUNA NIGUEL CA 92677-7581

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR EDI ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR826843611162

Amount of Each Receipt this Period

20.00

P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CORINNE M SUDBECK

Mailing Address 500 39TH ST

City State Zip Code
 NEWPORT BEACH CA 92663-3290

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR826843711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. LEE A BENNETT

Mailing Address 11285 SHOREVIEW CIR

City

INDIANAPOLIS

State

IN

Zip Code

46236-8626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR DIR NAT'L ACCTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR82777911162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. GEORGE M MCFADDEN

Mailing Address 20721 AVALON DR

City

ROCKY RIVER

State

OH

Zip Code

44116-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP FIELD WHOLESALING

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR829263111162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. KEVIN A CORWIN

Mailing Address 8920 OLDE MEADOW WAY

City

SPOTSYLVANIA

State

VA

Zip Code

22551-4568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR832704311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. PAUL B KUDYBA

Mailing Address 9361 SW 69TH ST

City
MIAMIState
FLZip Code
33173-2360FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR832704411162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES J LOWERY

Mailing Address 1261 HANOVER TL.

City

WAUNAKEE

State

WI

Zip Code

53597-2648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR832704511162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. GEOFFREY P KISSEL

Mailing Address 16 WHISTLING ISLE

City

IRVINE

State

CA

Zip Code

92614-5458

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP INSTITUTIONAL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR835331811162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

305.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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 for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. GEORGE A MAHASSEL

Mailing Address 4 STONEGATE CIR

 City
 GRAFTON

 State
 MA

 Zip Code
 01519-1250

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR835331911162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DARRELL DELL'ANDREA

Mailing Address 1 BLUECOAT

 City
 IRVINE

 State
 CA

 Zip Code
 92620-2607

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR840159111162

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. EDMUND M JOHNSON

Mailing Address 23 HOLLYHOCK LN

 City
 MISSION VIEJO

 State
 CA

 Zip Code
 92692-5944

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP ARCHITECTURE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2015					

Transaction ID : PR848549911162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. EDWARD F BACON

Mailing Address 19 CORONEL PL

City State Zip Code
 ALISO VIEJO CA 92656-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

VP FIN PLANNING & RPTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849893811162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MS. HEATHER R BRADLEY

Mailing Address 355 E OHIO ST

City State Zip Code
 CHICAGO IL 60611-5452

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

LTC REGIONAL DIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849893911162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. BRETT R CASTINADO

Mailing Address 1318 JONES ST

City State Zip Code
 OMAHA NE 68102-3219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

INTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849894011162

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

255.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 OF 120
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. NICOLE J HOURIGAN

Mailing Address 314 WALNUT ST

City State Zip Code
 NEWPORT BEACH CA 92663-1922

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR IT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849894211162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. CHARLES E JERNIGAN

Mailing Address 1321 BELFI LN

City State Zip Code
 PLACENTIA CA 92870-8221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

DIR ACCTG & RPTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849894311162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. MONICA M KANG

Mailing Address 113 DOVERWOOD

City State Zip Code
 IRVINE CA 92620-2175

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

ADVD DESIGN CONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 30 / 2015

Transaction ID : PR849894411162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 110 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. HYUNG T KIM

Mailing Address 39 WYNDHAM ST

City

LADERA RANCH

State

CA

Zip Code

92694-0251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP RE INVESTMENTS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR849894511162

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL R SPINA

Mailing Address 15971 MATARO BAY CT

City

DELRAY BEACH

State

FL

Zip Code

33446-9731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SR WHOLESALER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR849894611162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES E YECKEL

Mailing Address 21681 BLUEJAY ST

City

TRABUCO CANYON

State

CA

Zip Code

92679-3469

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

BUS UNIT AUDIT MGR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				30				2015					

Transaction ID : PR849894711162

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 120

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL J JORDAN

Mailing Address 90 PILGRIM LN

City

DREXEL HILL

State

PA

Zip Code

19026-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

FVP MUTUAL FUND SPEC

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		3	0		2	0	1	5		

Transaction ID : PR85807011162

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

30627.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Deb Fischer For U.S. Senate

Mailing Address P.O. Box 83287

City Lincoln	State NE	Zip Code 68501
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Ms. Debra Fischer

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NE District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2015

Transaction ID : 13693998

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Deb Fischer For U.S. Senate

Mailing Address P.O. Box 83287

City Lincoln	State NE	Zip Code 68501
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Ms. Debra Fischer

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NE District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2015

Transaction ID : 13693999

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Kelly AyotteMailing Address 499 South Capitol Street, SW
Suite 420

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Sen. Kelly Ayotte

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712452

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1433 R Street NW #2

City Washington	State DC	Zip Code 20009
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Sen. Joseph Donnelly Sr.

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712453

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Heidi For Senate

Mailing Address 420 C Street, NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Ms. Heidi Heitkamp

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: ND District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712454

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Kirk for Senate

Mailing Address 209 Pennsylvania Ave., SE

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Mark Kirk

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712455

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Manchin For West Virginia

Mailing Address 426 C Street, NE

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Sen. Joe Manchin III

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712456

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. People for Patty Murray

Mailing Address 1602 Belle View Blvd #510

City Alexandria	State VA	Zip Code 22307
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Patty Murray

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712457

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Montanans For TesterMailing Address 303 Massachusetts Avenue NE
Suite 207

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Sen. Jon Tester

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712458

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lou Correa for Congress

Mailing Address P.O. Box 1107

City Anaheim	State CA	Zip Code 92815
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Lou Correa

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 46

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : 13712459

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Lynn Jenkins for Congress

Mailing Address 104 Hume Avenue

City Alexandria	State VA	Zip Code 22301
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Lynn Jenkins

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: KS	District: 02

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : 13712460

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Larson for CongressMailing Address 413 New Jersey Ave, SE
Basement Level

City Washington	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

John Larson

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CT	District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : 13712461

Amount of Each Disbursement this Period

500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Larson for CongressMailing Address 413 New Jersey Ave, SE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

John LarsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712462

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Levin for Congress

Mailing Address 412 First Street SE, Suite 100

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Sander LevinOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712463

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Lewis For Congress

Mailing Address P.O. Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement
Contribution

Candidate Name

Rep. John LewisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712464

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kristi For Congress

Mailing Address PO Box 15239

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Rep. Kristi NoemOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712465

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. PAC TO THE FUTUREMailing Address 430 South Capitol Street, SE
First Floor

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

PAC TO THE FUTUREOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712466

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Tom Reed For Congress

Mailing Address PO Box 10847

City	State	Zip Code
Rochester	NY	14610

Purpose of Disbursement
Contribution

Candidate Name

Rep. Tom ReedOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712467

Amount of Each Disbursement this Period

500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tom Reed For Congress

Mailing Address PO Box 10847

City	State	Zip Code
Rochester	NY	14610

Purpose of Disbursement
Contribution

Candidate Name

Rep. Tom Reed

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NY	District: 23

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712468

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Loretta Sanchez For US Senate

Mailing Address PO Box 6037

City	State	Zip Code
Santa Ana	CA	92706

Purpose of Disbursement
Contribution

Candidate Name

Loretta Sanchez

Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District:

Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712469

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Concerned Americans for Freedom & Opportunity PAC

Mailing Address 516 North Washington Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution

Candidate Name

Concerned Americans for Freedom & Opportunity PAC

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
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Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712471

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stivers For Congress

Mailing Address 217 Third Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Rep. Steve Stivers

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: OH	District: 15

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712472

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mark Takano For CongressMailing Address 410 1st Street, SE
Suite 310

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Rep. Mark Takano

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 41

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712473

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Juan Vargas For Congress

Mailing Address P.O. Box 636

City	State	Zip Code
Annandale	VA	22003

Purpose of Disbursement
Contribution

Candidate Name

Mr. Juan Vargas

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 51

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : 13712474

Amount of Each Disbursement this Period

1500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 120

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kyrsten Sinema For Congress

Mailing Address 220 I Street NE, Ste 250

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

Candidate Name

Rep. Kyrsten Sinema

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: AZ	District: 09

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2015

Transaction ID : 13712475

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

33000.00
